



Case Study

AYURVEDIC MANAGEMENT OF NASA ARSHA W.S.R TO NASAL POLYP

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ABSTRACT

Shalaky tantra has given more importance among the eight branches of Ayurveda, for dealing with the vital sense organs located above the *Jatru* (clavicle), also considered as *Uttamanga* in Ayurveda. *Arshas* is described as one of the *Asta mahagada roga* by *Acharyas* and also explained fourfold treatment such as *Bheshaja*, *Shastra*, *Kshara* and *Agni karma*. The *Nasa arshas* means *Arshas* located in the nasal cavity causing nasal obstruction. The predominant *Dosha* is *Kapha* and *Dushya* are *Twak*, *Mamsa* and *Medho dhatus*. *Nasaarshas* can be correlated with nasal polyps. Nasal polyps are non-neoplastic masses of oedematous, prolapsed, pendunculated nasal or sinus mucosa. It can be treated by medical and surgical methods. Prolonged usage of anti-histaminics, steroids, antibiotics, nasal decongestants cause drug resistance, decreases the immunity, rebound congestion and there is a lot of chance for reoccurrence, even after the surgery especially in ethmoidal polyp. In Ayurveda the treatment modalities given are *Apatarpana chikitsa*, *Vata anulomaka*, *Bala* and *Agni vardhaka chikitsa*. Here the present case study was planned to evaluate the efficacy of *Yava kshara nasa pichu*, *Shikhari taila nasya* and *Shamana oushadhas*. Over all there is a significant improvement in the condition. Through Ayurveda we can treat nasal polyps non invasive, cost effectively and improving the quality of life.

INTRODUCTION

The term *Arsas* is defined as “*Arivat prana shrinatiarsha*”- The disease which tortures the person like enemy.^[1] The *Arsas* can be seen in several locations in the body like lower part colon, pudendum, female genital tract, throat, palate, mouth, nose, ears, eyelids and skin because in the above mentioned locations the *Doshas* vitiating the *Twak* (skin including mucous membrane), *Mamsa* (muscle tissue) and *Medas* (fat tissue) and produce *Mamsaankura* of different shapes^[2].

Nasa Arshas is mentioned in both *Bhrihat trayee* and *Laghutrayee*. Acharya Sushruta has been explained total 4 types of *Nasa arsha*: *Vataja*, *Pittaja*, *Kaphaja* and *Sannipataja* as well as explained fourfold treatments: *Bhesaja*, *Shastra*, *Kshara* and *Agni karma*.^[3]

Nasal polyps is defined as an inflammatory, collection of extracellular fluid and non-neoplastic masses of edematous, prolapsed nasal mucosa arise from the sinuses or the nasal cavity. The polyps are sessile in the beginning and later become pedunculated due to the effect of gravity and the excessive sneezing. The 2 most common clinical types are ethmoidal and antrochoanal.^[4]

Nasal polyps can be associated with allergic or without allergic manifestation. Statistically in general population the overall prevalence rate of nasal polyposis ranges from 1-4%. It is more common in adults than in children under 10 years of age except when it is associated with cystic fibrosis. The association of nasal polyposis with asthma is well recognized ranging from 7-20%. The association of nasal polyposis, bronchial asthma, and aspirin sensitivity- Samter’s triad has also been found. Furthermore, the incidence of nasal polyps is higher in non-atopic asthmatics and rhinitis than atopic rhinitis and asthmatics.^[5]

The clinical features explained by Acharya Sushruta, Acharya Vagbhatta and the Clinical Features mentioned in Modern Science are as follows:^[6,7]

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Symptoms of Nasa Arshas	Symptoms of Nasal Polyps
Pratishaya atimatram	Runny nose
Nasa avarodha	Nasal obstruction (difficulty in breathing)
Kshvathu	Sneezing, itchy nose- if associated with allergy
Putinasa	Hyposmia or anosmia depending on severity.
Saanunasika vakyam	Hyponasal voice
Shirovyatha	Headache
	Altered or reduced sensation of taste
	Post nasal drip

Staging^[8]

Polyps can be staged based on the size

Stage I: Limited to the extent of middle meatus.

Stage II: Extending beyond the limit of Middle Turbinate.

Stage III: Approaching to inferior turbinate.

Stage IV: Going up to the floor of nose.

Management of nasal polyposis can be done by both conservative and surgical procedures. Early edematous polypoidal mucosal changes may revert to normal by using antihistaminic, control of infection and allergy. A short course of steroids also useful to prevent recurrence after surgery^[9] polyps which are not responding to medication are managed by Functional Endoscopic Sinus Surgery (FESS). Complete surgical removal of the polyp Transnasally or Transorally should be done if there is any incomplete resection is present there is a chance of reoccurrence. Caldwell-Luc operation, which was done in the past, was associated with more morbidity.^[10] Prolonged usage of Anti histaminics, oral corticosteroids, nasal decongestants causes drug resistance, decreases immunity and rebound congestion by doing surgery nasal obstruction will be reduced but does not control the allergy, infection and polyps may reoccur. Some patients may fear for surgery, its complications and cost. Hence the present case study was taken to evaluate the efficacy of *Ksharakarma* along with internal medication in the management of *Nasaarshas* w.s.r to nasal polyps.

OBJECTIVES

- To Evaluate the Efficacy of *Kshara Karma* in the management of *Nasaarshas* w.s.r to Nasal Polyps.
- To Evaluate the Effect of oral Ayurvedic medication in reducing frequency of symptoms by improving

the immune system of the patient through curative and preventive measures.

- To improve the quality of life of the patient
- To provide cost effective and safe treatment.

Case Study

Chief Complaints with Duration: A male patient of aged 48 years has been suffering from difficulty in nasal breathing, sneezing, bilateral thick and yellowish discharge, foul smell, itching sensation in throat, nose, eyes, ears on and off and frontal headache on and off since 1 year.

History of Present Illness: Patient was asymptomatic before 1 year gradually developed difficulty in nasal breathing, sneezing associated with bilateral thick mucoid discharge along with foul smell, nasal phonation that patient was unable to concentrate on daily activities the symptoms are worsen and frequency also increased. So he consulted ENT specialist on nasal examination diagnosed as nasal polyps then he was prescribed with anti histamines, nasal decongestants. After using medication patient got relief for few days but recurrence of symptoms. So doctor suggested undergo surgery for nasal polyp. Patient was not willing to go under surgical treatment. So patient came to our OPD for further management.

History of Past Illness

- a) Medical History - K/C/O asthma since 15 years (under medication),
- b) Surgical History - FESS surgery in 2011.

Personal History

- a) Appetite - Poor
- b) Bowel - Regular
- c) Micturation - Normal
- d) Sleep - Disturbed due to difficulty in breathing

Family History - Father is also having allergy to dust, smoke

General Examination

- a) Pulse- 72b/min
- b) Blood Pressure- 130/70mmHg
- c) Temperature- 98.6°F
- d) Others-No
Lymphadenopathy/Icterus/Cyanosis/Clubbing

Nasal Examination

Inspection - DNS towards Right side

Palpation- Examination of paranasal sinuses tenderness present in maxillary, frontal sinus.

Anterior Rhinoscopy- Bilateral round, pale, glossy, polypoidal masses in the middle meatus is seen. Insensitive to probing, does not bleed on touch when examined by using Jobsons probe. Posterior Rhinoscopy - Nothing specific.

Assessment Scale of Grading

S.No	Symptom	Severity
1	Nasa Avarodha (Nasal Obstruction)	0 -No obstruction 1 -Inhalation and exhalation with effort unilateral 2 -Inhalation and exhalation with effort bilateral 3 -Inhalation and exhalation to be supplemented with mouth breathing 4 -Complete block with mouth breathing
2	Nasa srava (Nasal discharge)	0-No discharge 1-Occasional discharge with a feel of running nose 2-Running nose which needs mopping 3 -Running nose which needs continuous mopping 4 -Intolerable
3	Kshvathu (Sneezing)	0-No sneezing 1-0 -10 sneezing 2-10 -15 sneezing 3-15 -20 sneezing 4- More than 20 sneezing
4	Shirashula (Headache)	0-No headache 1-Mild with not interfering with daily activities 2 -Moderate with carry routine work with more difficulty 3-Severe with unable to do routine works 4-Intolerable
5	Puti nasa (Foul Odour)	0-Absence of odour 1-Questionable odour 2-Mild Malodour 3-Moderate malodour, detectable, but examiner can tolerable 4-Strong malodour is detected, but examiner cannot tolerable
6	Saanunasika Vakyam (Nasal phonation)	0-Normal Speech 1-Slight deviation (Single occurrence) 2-Mild deviation (Evident on high vowels) 3-Moderate deviation (Frequently occurring Evident on high and low vowels) 4-Severe deviation (Occurring always Evident on vowels and Consonants)
7	Itching in nose, throat, eyes	0-No Itching 1-Mild with not interfering with daily activities 2 -Moderate with carry routine work with more difficulty 3-Severe with unable to do routine works 4-Intolerable

MATERIALS AND METHODS

Source of Data

The data was collected from the OPD of PG. Dept of Shalaky Tantra, Government Ayurvedic Hospital, Erragada, drug selection was done according to the classical reference.

Treatment Given

Poorva Karma - Mukha Abhyanga with Nirgundi taila followed by Bhashpa Sweda.

Pradhana Karma - Yava kshara Nasa Pichu for 10 minutes in each nostril followed by Shikari Taila Nasya for 7 days (3 cycles) with five days gap.

Paschat Karma - Triphala Kashaya Gandusha, Haridradi Dhoomanasya.

Internal Medication

S.No	Name of the medicine	Dose	Time	Anupana
1	<i>Tab.Kanchanara Guggulu</i>	2-x-2	After food	Lukewarm water
2	<i>Haridra khanda</i>	3g-x-3g	After food	Lukewarm milk
3	<i>Chitraka Haritaki lehyam</i>	3g-x-3g	After food	Lukewarm water
4	<i>Avipattikara Churna</i>	3g-x-3g	before food	Lukewarm water

Medication Prescribed on discharge for 1month

S.No	Name of the medicine	Dose	Time	Anupana
1	<i>Tab.Kanchanara Guggulu</i>	2-x-2	After food	Lukewarm water
2	<i>Haridra khanda</i>	3g-x-3g	After food	Lukewarm milk
3	<i>Agastya Rasayanam</i>	3g-x-3g	After food	Lukewarm water
4	<i>Avipattikara Churna</i>	3g	Bed Time	Lukewarm water
5	<i>Laghusuta sekharas ras</i>	1-x-1	Before food	Lukewarm water
6	<i>Shad bindu taila</i>	2d-x-2d	Before food	None

OBSERVATION AND RESULT

The condition of the patient improved gradually. After completion of 30 days of treatment and follow up for one month, the clinical assessment was made from patient with the help of interrogation and assessment of objective parameters. The patient has shown excellent improvement.

S.No	Symptoms	BT	After 1 st Sitting	After 2 nd Sitting	After 3 rd Sitting	Follow up (After 15days)
1	<i>Nasa Avarodha</i> (Nasal obstruction)	4	3	2	2	0
2	<i>Nasa Srava</i> (Nasal discharge)	4	3	2	1	1
3	<i>Kshvathu</i> (Sneezing)	4	3	1	1	0
4	<i>Shirashula</i> (Headache)	4	2	2	1	1
5	<i>Puti Nasa</i> (Foul odour)	4	2	2	1	0
6	<i>Saanunasika Vakyam</i> (Nasal phonation)	4	3	2	2	0
7	Itching in nose, throat, eyes	4	4	3	2	1

Pictogram of Nasal Polyps Before and After Treatment**DISCUSSION**

In the *Samprapti* of *Nasa Arshas* the predominant of *Dosha* was *Kapha* along with *Alpa Vata* and *Alpa Pitta*, *dushya* is *Twak*, *Mamsa*, *Medo*, along with *Jalabahulyata*. So to break the above pathogenesis

the modality would be *Apatarpana*, *Vata Anulomana*, *bala* and *Agni vardhaka*.

Yava kshara^[11] having the property of *Lekhana*, *Ushna*, *Medohara*, *Kaphavata hara*.

Nasya with *Shikari taila*^[12] having properties like *Ushna*, *Teekshna*, *Ksharana*.

The above mentioned both drugs are *Kshariya* in nature as *Kshara* destroys the *Soumya* property. Though first it produces the *Kshata* (hurt or wound), later it gives the relief (*Akshata*).

Action of *Dhumapana*: Due to *Sukshma*, *Tikshna*, *Ushna* *guna* of *Dravya* it enters the channels, liquifies and removes the excess *Kaphadosha*.

Internally *Kanchanara guggulu*^[13] is having *Tridoshahara* especially *Kaphahara*, *Sotha hara*, *Lekhana* and *Chedana* at *Mamsa* and *Medho* level, *Krimighna*, *Atimamsa hara*, *Vrana shodhana* and *Ropana*, anti-inflammatory. *Chitraka haritaki*^[14] is prescribed to mainly increase the *Agni* and *Vatakapsha Shamana* and it also having *Kaphanissaraka* and *Lekhana* property. *Haridra khandi*^[15] especially shows *Kapha shamana*, *Krimighna*, anti-histaminic, anti-allergic, anti-microbial effect. *Avipattikara churna*^[16], *Laghusutasekhar ras*^[17] Especially for *Pittakapha shamana*, *Anulomana* and to reduce the gastric irritation, headache.

As the patient is a k/c/o asthma since 15 years *Agasthya rasayana*^[18] is also prescribed as it is having the properties like *Vatakapsha Shamana*, *Vataanulomaka*, *Rasayana*, *Puppusa balya*, *Medohara*, immunomodulator, expectorant, anti-tussive, bronchodilator, anti-histaminic. After using these medicines for one month patient had stopped using nasal spray (Foracort 100). *Shadbindu taila*^[19] as *Pratimarsha nasya* to lubricate the nasal passage and helps to decongest the sinuses.

Pathya to be followed are like staying in *Nirvata pradesha*, drinking hot water or boiled water by adding pinch of *Shunti* and *Dhanya* powder, *Laghu ahara*, *Pranayama*.

Apathya to be avoided are eating freeze food, fast food, fried food, afternoon sleep, late night awakening, traveling, exposing to cool air.

CONCLUSION

Nasal polyps can be correlated with *Nasaarshas* based on pathogenesis and clinical features. Ayurveda believes in cleansing the body, pacifying the *Tridoshas* from the roots by using the treatment modality such as *Nidana parivarjana*, *Samprapti vighatana* by *Shodhana*, *Shamana*, *Sthanik chikitsa* along with *Patya* and *Apathya ahara*, *Vihara* rules and regulations. *Kshara* and *Nasya karma* regresses the size of nasal polyps and thus making the patient free from non invasive method. Through internal medication the *Agni* and *Bala* of the person is increased. Over all there is a significant improvement in the condition with no recurrence of symptoms. Hence there is need to implement Ayurvedic medicines in larger samples of the disease to draw a concrete conclusion

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